**Health Emergencies in Large Populations (H.E.L.P.) course**

**Transversal Approaches to Violence: Sexual Violence**

**Time allocated: 90 minutes**

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| **Educational Objectives: What should participants be able to do at the end of the course** | **Enabling Objectives: The interim steps that build on each other and lead to the final educational objectives**   | **Core issues**  |
| 1. *Participants are able to* explain the nature of sexual violence in acute and protracted crises
 | * 1. *Participants are able* *to* describe different types of sexual violence and how these are part of violence overall, and why these may be widespread but remain invisible.
 | * Definition of sexual violence
* Description gender-based violence (GBV) and sexual violence; forms of these two
* Reasons for invisibility -> implications for knowing prevalence data and humanitarian priorities
* Prevalent in all societies; Increase during crisis situations
* Legal aspects (briefly)
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| * 1. *Participants are able to* identify different vulnerable groups (potential victims) and potential perpetrators of sexual violence
 | * Circumstances that increase the risks, e.g.
* Changes in the social fabric due to the crisis situation, armed conflict, displacement, people deprived of freedom, gender inequality, homophobia
* Characteristic of vulnerable groups, e.g.
* Boys and girls
* Women and men outside the social protection mechanisms and/or vulnerable due to lack of income,
* Belonging to a certain group (e.g. ethnic minority, people deprived of freedom)
* Characteristics perpetrators; wide variety, e.g.
* Intimate partners
* Sexual exploitation abuse by service providers (transactional sex); perpetrators may include humanitarian personnel
* Armed groups, etc.
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| * 1. *Participants are able to* discuss main determinants of sexual violence in crisis situations
 | * Changes in the social fabric as result of the crisis
* Lack of law and order
* Increased stress
* Decreased economic opportunity
* Change in gender roles
* In situations of armed conflict the following division is made
* Opportunistic determinants
* Practice of the entity (wide spread practice that is not sanctioned)
* Strategic determinants (war tactic)
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| 1. *Participants are able to* explain the consequences of sexual violence, the needs of victims of SV and the challenges of addressing these needs
 | * 1. *Participants are able to* explain different consequences of sexual violence at the level of an individual, family and community
 | * Physical, psychological and socio-economic consequences at the three levels
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| * 1. *Participants are able to* explain the primary needs of victims of sexual violence
 | * Primary needs: Care, safety and survival
* In particular: access to timely & appropriate health care (72h), including psychological support (72h = medical emergency)
* Need to ensure:
* Confidentiality when responding to the needs
* Security of victims/survivors from further violations and reprisals
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| * 1. *Participants are able to* explainthe challenges in responding to the needs of victims of sexual violence and barriers victims may face to access services
 | * Non-visibility of sexual violence
* Reasons that person does not access care
* Non-availability of care
* Unawareness of victims/survivors
* Fear of retaliation, feelings of shame and guilt, taboo
* Risks of safety
* Logistical obstacles
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| 1. *Participants are able to* discuss how they can contribute to a comprehensive approach to address sexual violence in acute and protracted crises
 | * 1. *Participants are able to* explain principles of good practice and appropriate interventions for addressing primary needs of survivors of sexual violence
 | * Appropriate interventions
* Post-exposure medical care (wound care and prevention of tetanus; presumptive STI treatment; post-exposure prophylaxis (PEP), emergency contraception, prevention hepatitis B, prevention of human papilloma virus (HPV),
* Mental health and psychosocial support
* Collection of forensic evidence
* Referrals; linking victims/survivors with other services
* Principles:
* Do no harm, confidentiality, non-judgmental
* Holistic response (taking responsibility to take into account the multiple need; multi-layered)
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| * 1. *Participants are able to* identify interventions that enhance prevention and risk reduction of sexual violence
 | * Risk reduction, e.g.
* Lighting; firewood/energy sources; distance water points /water patrols; secure sanitation, bathing and washing places; including economically vulnerable groups in assistance programmes
* Community awareness, consultation with the community
* Dialogue with authorities (community level, detaining authorities, armed forces)
* Code of conduct for humanitarian workers in place and enforced
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| * 1. *Participants are able to* explain how they can integrate addressing sexual violence into their work to ensure that it constitutes a part of a comprehensive approach
 | *Participants reflect individually three minutes on how they can integrate this in their work -> discussion in plenary* |